

## CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE 2008 JAN 29 PH II: 29

signed ZUUC

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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. The true name(s) and business address(es) business under the assumed business name Name Robert E. Cordes Estella M. Cordes	of the entity or individual(s) doing : Complete Address 109 N. Wright Blvd, Libertry Lake, WA 99019 109 N. Wright Blvd, Liberty Lake, WA 99019
The general type of business transacted und	· ·
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080 (208) 334-2301
	Secretary of State use only
ature: Kohs Coulo  [telgrature required]  ted Name: Robert E. Cordes  acity/Title: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STORES

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